FORM 3X 1. NAME OF COMMITTEE (in

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TYPE OR PRINT ▼ Example: If typing, type NAME OF 12FE4M5 COMMITTEE (in full) over the lines. [PIZINGUILIN PHICI 18,0, F, S,+,F, e, e, t, NW ADDRESS (number and street) Check if different than previously 20,0,0,1 DIC reported. (ACC) ZIP CODE A CITY A STATE A FEC IDENTIFICATION NUMBER ▼ AMENDED NEW IS THIS X 00417584 (N) OR (A) REPORT TYPE OF REPORT Nov 20 (M11) Aug 20 (MB) (b) Monthly Feb 20 (M2) May 20 (M5) (Non-Election Report (Choose One) Year Only) Due On: Dec 20 (M12) Sep 20 (M9) Jun 20 (M8) Mar 20 (M3) (Non-Election Year Only) (a) Quarterly Reports: Oct 20 (M10) Jan 31 (YE) Apr 20 (M4) Jul 20 (M7). April 15 Quarterly Report (Q1) Runoff (12R) General (12G) (c) Primary (12P) 12-Day July 15 PRE-Election Quarterly Report (Q2) Special (12S) Convention (12C) Report for the: October 15 Quarterly Report (Q3) in the January 31 State of Election on Year-End Report (YE) July 31 Mid-Year 30-Day (d) Report (Non-election Special (30S) Runoff (30H) General (30G) **POST-Election** Year Only) (MY) Report for the: Termination Report in the (TER) State of Election on Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Michael Type or Print Name of Treasurer Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g. **FEC FORM 3X** Office